

Consumer Services Department

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miamidade.gov

TAXICAB ADVISORY GROUP APPLICATION

(DEADLINE FOR SUBMISSION OF APPLICATION IS MONDAY, JUNE 14, 2010)

Na	Name: Title:	Title:	
Cc	Company Name: For-Hire/Chauffeur License #:	For-Hire/Chauffeur License #:	
Ad	Address:		
Те	Telephone:Fax:Email:		
1.	lease review the below vacant Taxicab Advisory Group (TAG) member categories dicate which seat you desire to apply for?		
 Taxicab Chauffeur with No Interest in a For Hire License Taxi Passenger Service Company Representative 			
2.	2. List all For-Hire transportation businesses in which you have a financial interest:		
	or, check box below:		
	☐ I do not have a financial interest in any for-hire transportation business.		
	3. Provide a detailed description of your background and qualifications. You may resume or detailed Bio.	y attach a	
4 .	4. Why do you want to serve on the TAG?		
5.	5. TAG meetings are generally held quarterly. Will anything prevent you from att meetings on a regular basis?	tending	
	6 . Do you or your business have any unpaid civil penalties, unpaid administrative costs, unpaid enforcement costs, or unpaid liens owed to Miami-Dade County?	hearing	
	☐ Yes ☐ No (Please attach additional pages as necessary)		